

Q.C.  
11/10  
AG

ISSUE SI IP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>huy</i>		<i>9/13/00</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>9-29-00</i>
FORMALITY REVIEW	<i>per</i>	<i>830</i>	<i>11-02-00</i>
RESPONSE FORMALITY REVIEW	<i>MD</i>	<i>JCST</i>	<i>02/28/01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral) ..... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓
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6	
7	✓
8	0
9	0
10	0
11	✓
12	✓
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16	
17	✓
18	✓
19	0
20	0
21	0
22	✓
23	✓
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28	✓
29	0
30	0
31	0
32	✓
33	✓
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37	0
38	0
39	✓
40	✓
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43	✓
44	0
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46	✓
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Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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